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FAX TRANSMISSION COVER SHEET

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Date:January 9, 2006

To: Examiner: Mitra Aryanpour 571 273 8300

Subject: S.N.10/761,132, our Docket 12,800

3 pages (includes the cover sheet)

COMMENTS: see attached

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PATENT

JAN 09 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Art Unit 3711

Examiner: Mitra Aryanpour

Applicant:

Raymond A. Liberatore

Serial No:

10/761,132

Filed:

January 20, 2004

For:

RETENTION OF WEIGHTING ON  
ATHLETIC STRIKER

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Pasadena, California  
January 9, 2005


Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is a revocation of  
prior power and a fresh power from the inventor Raymond A.  
Liberatore, to William W. Haefliger, Registration No.17,120,  
201 S. Lake Ave., Pasadena, CA 91101, Tel 323 684-2707.

An interview is scheduled, for 1-18-06, as  
understood.

Respectfully,

  
William W. Haefliger  
Attorney for Applicant  
Registration No.17,120  
Area Code 323 684-2707

WWH:hk  
Docket 12,800

JAN 09 2006

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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/761,132
Filing Date	Jan. 20, 2004
First Named Inventor	Raymond A. Liberatore
Art Unit	3711
Examiner Name	Michael S. Chambers
Attorney Docket Number	12.800

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

2675

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<input type="checkbox"/> Firm or Individual Name	William W. Haeffliger				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

Signature	SIGNATURE of Applicant or Assignee of Record	
Name	RAYMOND A. LIBERATORE	
Date	12-6-05	
Telephone	(479) 271-0823	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

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